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**MOTOROLA****FAX TRANSMITTAL SHEET**Motorola, Inc.
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18

Number of Pages (including this page)

Date:

To: Examiner: Linh L.D. Son
Art Unit: ~~2614~~ 2135RECEIVED
OIPE/IAP

Location: United States Patent and Trademark Office

OCT 18 2005

Fax No.: 571-273-8300

From: Attorney: Lawrence T. Cullen Reg. No. 44,489

Subject: Serial No. 10/002,306 Filed: 11/02/2001 Docket No. D2805

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MESSAGE:

Enclosed herewith, please find Amendment in response to the Office action mailed on June 30, 2005, Petitional for 1 Month Extension of Time, and Fee transmittal, including fee for Disclaimer, for filing in the above-identified application.

PLEASE GIVE THESE PAPERS TO:


EXAMINER: Linh L.D. Son

GROUP ART UNIT: ~~2614~~ 2135

ATTORNEY DOCKET NO.: D2805

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Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) FEE TRANSMITTAL For FY 2005 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
TOTAL AMOUNT OF PAYMENT		Application Number: 10/002,306 Filing Date: November 2, 2001 First Named Inventor: Aaron M. Smith Examiner Name: Linh L.D. Son Group Art Unit: -2644 2135 Attorney Docket No.: D02538	
(\$ 250)			
METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 502117 Deposit Account Name: MOTOROLA, INC. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	
EXAMINATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	
Design	200	100	
Plant	200	100	
Reissue	300	150	
Provisional	200	100	
		Fee (\$)	Small Entity Fee (\$)
		500	250
		100	50
		300	150
		500	250
		0	0
		200	100
		600	300
		0	0
2. EXCESS CLAIM FEES			
Fee Description		Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent		50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200	100
Multiple dependent claims		360	180
Total Claims - 20 or HP = <input type="text"/> x <input type="text"/> = <input type="text"/>		Multiple Dependent Claims Fee (\$) <input type="text"/>	
HP=highest number of total claims paid for, if greater than 20		Fee Paid (\$) <input type="text"/>	
Indep. Claims - 3 or HP = <input type="text"/> x <input type="text"/> = <input type="text"/>		Fee Paid (\$) <input type="text"/>	
HP=highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE:			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
- 100 -	/50 =	(round up to a whole number) x	Fee Paid (\$)
			<input type="text"/>
4. OTHER FEE(S)			
Petition for 1 Mo Extension of Time			\$120
Terminal Disclaimer			\$130
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Lawrence T. Cullen	Registration No.	44,489
Signature		Telephone	215-323-1797
		Date	10/17/05